2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 824387

FILED Mar 24, 2004 Secretary of State

Entity Name: FRANCHISE STORES REALTY CORP. **Current Principal Place of Business: New Principal Place of Business:** 175 CAPITAL BLVD. STE, 400 ROCKY HILL, CT 06067 **Current Mailing Address: New Mailing Address:** 175 CAPITAL BLVD. STE, 400 ROCKY HILL, CT 06067 FEI Number: 13-1700771 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 323012525 US The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: (X) Change () Addition ROMANIEUO, STEVE Name: Name: ROMANIELLO, STEVE 175 CAPITAL BLVD. STE 400 175 CAPITAL BLVD. STE 400 Address: Address: City-St-Zip: ROCKY HILL, CT 06067 City-St-Zip: ROCKY HILL, CT 06067 (X) Delete Title: Title: CEOD () Change () Addition Name: PRESSMAN, THANE Name: 175 CAPTIAL BLVD. STE 400 Address: Address: ROCKY HILL, CT 06067 City-St-Zip: City-St-Zip: () Delete Title: Title: VΡ (X) Change () Addition CARDIN, ROBERT J JOE, AIELLI S Name: Name: 175 CAPITAL BLVD, STE 400 175 CAPITAL BLVD. STE 400 Address: Address: City-St-Zip: ROCKY HILL, CT 06067 City-St-Zip: ROCKY HILL, CT 06067 Title: () Delete Title: DIR () Change (X) Addition NEAL, ARONSON Name: Name: Address: Address: 175 CAPITAL BLVD. STE 400 City-St-Zip: City-St-Zip: ROCKY HILL, CT 06067 Title: Title: () Change (X) Addition SECR () Delete Name: Name: KATHRYN, ROOKES Address: Address: 175 CAPITAL BLVD, STE 400 City-St-Zip: City-St-Zip: ROCKY HILL, CT 06067

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOE AIELLI VP 03/24/2004